Botulinum Toxins

Point-of-Sale (POS) edits are safety limitations that are automatically verified through computer programming at the time that a prescription claim is submitted at the pharmacy. These edits can be applied to *any* medication, whether or not it is listed in the Preferred Drug List / Non-Preferred Drug List (PDL/NPDL). The first section of this document is organized to follow the order of the therapeutic classes in the PDL/NPDL and explains the POS edits for those medications.

POS Abbreviations

AL – Age Limit	DD – Drug-Drug Interaction	MD – Maximum Dose Limit	TD - Therapeutic Duplication
BH – Behavioral Health Clinical Authorization for Children Younger than 7 Years of Age	DS Maximum Days' Supply Allowed	PR – Enrollment in a Physician- Supervised Program Required	UN – Drug Use Not Warranted
BY – Diagnosis Codes Bypass Some Requirements	DT – Duration of Therapy Limit	PU – Prior Use of Other Medication is Required	X – Prescriber Must Have 'X' DEA Number
CL – Additional Clinical Information is Required	DX – Diagnosis Code Requirement	QL – Quantity Limit	YQ – Yearly Quantity Limit
CU – Concurrent Use with Other Medication is Restricted	ER – Early Refill	RX – Specific Prescription Requirement	

Pharmacy Prior Authorization Phone Numbers for MCOs and FFS

Aetna Better Health of Louisiana **1-855-242-0802**AmeriHealth Caritas Louisiana **1-800-684-5502**Fee-for-Service (FFS) Louisiana Legacy Medicaid **1-866-730-4357**Healthy Blue **1-844-521-6942**

Louisiana Healthcare Connections 1-888-929-3790

UnitedHealthcare 1-800-310-6826

Botulinum Toxins

POS Edits

DX – Pharmacy claims for botulinum toxins must be submitted with an appropriate diagnosis code as listed by generic and brand example in the chart below. *Any number or letter or combination of UP TO FOUR numbers and letters of an assigned ICD-10-CM diagnosis code
The underscore () can be any ONE number (0-9)

Diagnosis Description	Diagnosis Code	AbobotulinumtoxinA (Dysport®)	IncobotulinumtoxinA (Xeomin®)	OnabotulinumtoxinA (Botox®)	RimabotulinumtoxinB (Myobloc®)
Axillary Hyperhidrosis	L74.510			✓	
Blepharospasm	G24.5		✓	✓	
Cervical Dystonia	G24.3	✓	✓	✓	✓
Chronic Migraine (Prophylaxis)	G43.7*			✓	
Chronic Sialorrhea	K11.7		✓		✓
Overactive Bladder	N32.81			✓	
Strabismus	H49*, H50*, H51*			✓	
Urinary Incontinence (Detrusor Overactivity Associated with Neurological Disease)	N31.9, N36.44			√	
Recipients 2 Years of Age or Older (unless otherwise specified) With Spasticity Associated With:		Upper & Lower Limb	Upper Limb	Upper & Lower Limb	
Multiple Sclerosis	G35	✓	✓	✓	
Cerebral Palsy	G80.0, G80.1, G80.2, G80.4, G80.8, G80.9	✓	Adults ≥ 18 years of age	✓	
Spastic Hemiplegia	G81.1*	✓	✓	✓	
Complete Quadriplegia	G82.53	✓	✓	✓	
Incomplete Quadriplegia	G82.54	✓	✓	✓	
Diplegia Of Upper Limb	G83.0	✓	✓	✓	
Monoplegia of Upper Limb	G83.2*	✓	✓	✓	
Monoplegia of Lower Limb	G83.1*, G83.3*	✓		✓	

POS Edits							
Diagnosis Description	Diagnosis Co	ode	AbobotulinumtoxinA (Dysport®)	Incobotulinumtox (Xeomin®)	xinA	OnabotulinumtoxinA (Botox®)	RimabotulinumtoxinB (Myobloc®)
Monoplegia of Upper Limb Due to Late Effects of Cerebrovascular Disease	I6931, I69 I6933, I69 I6939		✓	✓		✓	
Monoplegia of Lower Limb Due to Late Effects of Cerebrovascular Disease	I6941, I69 I6943, I69 I6949		√			√	
Hemiplegia Due to Late Effects of Cerebrovascular Disease	I6951, I69 I6953, I69 I6959		√	√		✓	
Intracranial Injury of Other and Unspecified Nature (Traumatic Brain Injury)	\$06.1*, \$06.2*, \$ \$06.4*, \$06.5*, \$ \$06.8*, \$06.	S06.6*,	√	√		✓	
Spinal Cord Injury Without Evidence of Spinal Bone Injury	S14.0*, S14.1 S14.1_6*, S14.		√	✓		✓	
QL – IncobotulinumtoxinA (Xeomin®) and OnabotulinumtoxinA (Botox®) have quantity limits as listed in the chart to the right.			Generic (Brand Example)		Q	Quantity Limit per Rolling 84-Day Period	
		IncobotulinumtoxinA (Xeomin®)			400 units		
			OnabotulinumtoxinA (Botox®)		600 units [Six (6) 100-unit vials OR Three (3) 200-unit vials]		

Revision / Date	Implementation Date
Created POS Document	November 2020